under the definition of disability, even if the effects of the impairment are controlled by medication

This is important because if an individual, I repeat, is not considered to be disabled under the ADA, then they do not have the protections of the Americans with Disabilities Act. For example, as I said, they are not entitled to reasonable accommodation on the job and they can be fired for any reasonlet's say not being able to do the job without an accommodation. So if you are a person with a disability and you have an assistive device, you get the job and you need a reasonable accommodation so you can do the job, but the employer says: I am not going to do it, well, guess what. They do not have to because the individual is no longer considered disabled. But if they didn't have the assistive device, they wouldn't get the job in the first place.

This is what has happened, and it has created consternation among people with disabilities who want to use assistive devices and take medication and do things—they want to work. But if they do that, they are no longer protected by the ADA.

So that is why we have introduced the ADA restoration bill, to again overcome the hurdles the Supreme Court has pronounced in three or four cases—I won't get into those now—and so that we get to the original intent of the ADA, which is to say you are covered if you have a past disability, a present disability, or you are perceived to have a disability.

Again, I repeat, we have a supreme absurdity confronting people with disabilities now. People with serious health conditions, such as epilepsy or diabetes, who are fortunate to find treatments that make them more capable and independent, more able to work, may now find they are no longer covered by the ADA.

One last thing. In another Supreme Court case, the Court held there must be "a demanding standard for qualifying as disabled." This, too, has resulted in a much more restrictive requirement than Congress intended and has had the effect of excluding countless individuals with disabilities from the protections of the law.

So the situation cries out for a modest, reasonable legislative fix, and that is exactly what Senator Specter and Congressmen Hoyer and Sensenbrener and I and many other cosponsors propose to do with the ADA Restoration Act of 2007. Our bill amends the definition of disability so that people Congress originally intended to be protected are covered under the ADA.

Mr. President, 17 years ago, the Americans with Disabilities Act passed with overwhelming bipartisan support. Likewise, today, we are building a strong bicameral, bipartisan majority to support ADA restoration. As I said, the companion bill was introduced in the House last week. Now, as with the ADA in 1990, it will take some time. We have to have hearings. It has been re-

ferred to four committees in the House and referred to the HELP Committee here in the Senate. But I am grateful for the bipartisan spirit with which we are approaching this legislation.

We have said all along, going clear back to the 1980s, that the Americans with Disabilities Act is supremely nonpartisan. There is nothing Republican, Democratic, liberal, conservative, or anything else about this. It is simply doing the right thing. As we look back over the last 17 years, we can take pride in what we have done, particularly when you see the curb cuts all over America or you go into movie theaters now and you see places where people with wheelchairs can come in or you go into restaurants now and see families taking out somebody who maybe has a seeing-eve dog or a companion dog. We have even made the Capitol of the United States fully accessible to people with disabilities. As I said, every place all over America, even sports stadiums, has been transformed.

The ACTING PRESIDENT pro tempore. The time of the Senator has expired, and the time of the majority has also expired.

Mr. HARKIN. Mr. President, I ask unanimous consent for 1 more minute. The ACTING PRESIDENT pro tempore. Without objection, it is so ordered.

Mr. HARKIN. Again, we have come to the point where we have to go back and put into law what it is we originally intended and to cover people now who are caught in this absurd catch-22 situation. We have an opportunity again to come together as Republicans and Democrats. We have a chance to come together for millions of Americans with disabilities.

I look forward to working with colleagues on both sides of the aisle to restore Congress's original intent, to ensure that Americans with disabilities are protected from discrimination. So on behalf of Senator Specter and myself, the Senate bill is S. 1881, and we encourage Senators to take a look at it. We hope we can get good bipartisan support, have our hearings on it this fall, and get this enacted as soon as possible, probably early next year sometime.

Mr. President, I yield the floor, and I suggest the absence of a quorum.

The ACTING PRESIDENT pro tempore. The clerk will call the roll.

The assistant legislative clerk proceeded to call the roll.

Mr. BAUCUS. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

The ACTING PRESIDENT pro tempore. Without objection, it is so ordered.

CONCLUSION OF MORNING BUSINESS

The ACTING PRESIDENT pro tempore. Morning business is closed.

SMALL BUSINESS TAX RELIEF ACT OF 2007—MOTION TO PROCEED

The ACTING PRESIDENT pro tempore. Under the previous order, the Senate will resume consideration of the motion to proceed to the consideration of H.R. 976, which the clerk will report.

The assistant legislative clerk read as follows:

A motion to proceed to the bill (H.R. 976) to amend the Internal Revenue Code of 1986 to provide tax relief for small businesses, and for other purposes.

The ACTING PRESIDENT pro tempore. The Senator from Montana.

Mr. BAUCUS. Mr. President, the psalmist sang:

Out of the mouths of children and infants, You have ordained strength.

Today we begin debate on a bill to renew and add strength to a program that helps children and infants, the State Children's Health Insurance Program, known as SCHIP. CHIP works. Since the plan began 10 years ago, CHIP, or the Children's Health Insurance Program, has cut the number of children without health insurance by more than a third, more than a third over the last 10 years.

Health insurance matters. Children with health coverage are more likely to get the care they need when they need it; that is, if they have health coverage. Because of SCHIP, millions of children get checkups. They see doctors when they are sick. They get the prescriptive medicines they need.

Uninsured children suffer. Uninsured kids are less likely to get care for sore throats, for earaches, and asthma. When care is delayed, small problems can become big problems. Nearly half of uninsured children have not had a checkup in the past year. Uninsured children are twice as likely to miss out on doctor visits or a checkup.

I think of a single mother from my home town of Helena, MT, who learned that her son had epilepsy. When did she find out? She found out right after her son lost private health coverage. She checked into other health care plans but none covered the expensive medication her son needed. Plans called her son's epilepsy a preexisting condition.

Then a friend told her about CHIP. She applied, and she found out her son was eligible. Thanks to CHIP, this young man got the medications he needed, and his mother got the peace of mind she deserved.

CHIP, again known as Children's Health Insurance Program, makes sense as an investment. A child who is healthy can go to school. A child who is healthy in school is more likely to do well. A child who does well in school is more likely to get a job. And people with jobs are less likely to end up in jail or on public assistance.

Thus, CHIP helps Americans to compete. Ensuring that kids can have health insurance is an investment in America's future

CHIP helps. CHIP helps more than 6 million children whose parents work